

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	✓		1-26-04

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	
Original	
1	12/15
2	✓ 1/2
3	✓
4	✓ 0
5	0
6	0
7	0
8	✓
9	✓
10	✓
11	✓ ✓
12	✓ N N
13	✓
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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